

**MONTHLY NATURAL GAS MARKETER SURVEY
FORM EIA-910**

This report is **mandatory** under the Federal Energy Administration Act of 1974 (Public Law 93-275). Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For the sanctions and the provisions concerning the confidentiality of information submitted on this form, see instructions. **Title 18 USC 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction**

PART I. RESPONDENT IDENTIFICATION DATA

REPORT PERIOD: Month: Year: 200

EIA ID NUMBER: 910

If this is a revision to a previous report, enter an "X" in the box:

If any Respondent Identification Data has changed since the last report, enter an "X" in the box:

Company Name: _____

Contact Name: _____

Phone No.: - - Ext:

Address 1: _____

Address 2: _____

City: _____

State: Zip Code: -

Fax No.: - -

Email address: _____

Complete and return form(s) no later than 30 days after the end of the reporting period.

Forms may be submitted using one of the following methods:

Mail to: Energy Information Administration, EI-45
U.S. Department of Energy
P.O. Box 8279
Silver Spring, MD 20907
Attn: EIA-910

Email: OOG.SURVEYS@eia.doe.gov

Fax: (202) 586-1076

Secure File Transfer:
<https://idc.eia.doe.gov/upload/noticeoog.jsp>

Questions? Call: 1-877-800-5261

PART II. NATURAL GAS SALES

Please provide the following information for your residential and commercial customers as defined in the instructions.

1. **Report State** (Enter one of the following States in the box: District of Columbia, Florida, Georgia, Illinois, Maryland, Massachusetts, Michigan, New Jersey, New York, Ohio, Pennsylvania, Virginia, West Virginia). (Submit a separate form for each State in which your company has sales to residential and/or commercial end-use customers. State

2. To how many end-use customers did you sell natural gas?

Residential	Commercial
<input type="text"/>	<input type="text"/>
(No. of Customers)	

3. How much natural gas did you sell to these customers? **Do not report negative numbers or decimals.** You may report in **either** thousand cubic feet (Mcf) **or** in Therms. Indicate unit of measure by placing an "X" in the appropriate box.

Residential	Commercial
<input type="text"/>	<input type="text"/>
Mcf <input type="checkbox"/>	Mcf <input type="checkbox"/>
Therms <input type="checkbox"/>	Therms <input type="checkbox"/>

4. **For companies reporting sales in all States except Georgia:**
What were the gross receipts for the natural gas commodity sold, plus other charges and taxes, excluding any amount owed to the local distribution company who transported gas to your customers?

Residential	Commercial
<input type="text"/>	<input type="text"/>
(Dollars)	

5. **For companies reporting sales in Georgia:**
What were the gross receipts including taxes associated with the sales and distribution of natural gas?

Residential	Commercial
<input type="text"/>	<input type="text"/>
(Dollars)	

Comments: